

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NH	92192	2/21/00
O.I.P.E. CLASSIFIER	W		3-1-00
FORMALITY REVIEW	DMIL	69169	4-6-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral)... Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	9/21/00
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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